



South Carolina Department of Motor Vehicles

COUNTY VETERANS AFFAIRS OFFICERS LICENSE PLATE APPLICATION

MV-73
(12/2020)

APPLICATION (PLEASE TYPE OR PRINT IN BLACK INK):

1. Plate is for private passenger motor vehicles owned by the County Veterans Affairs Officer.
2. Only **one** license plate may be issued to an applicant.
3. The fee for this plate is **\$30.00 plus regular registration fees.**
4. Mail application and check or money order payable to SCDMV to:

S.C. Department of Motor Vehicles, P.O. Box 1498, Blythewood, S.C. 29016-0038

- The plates are for cars or light trucks with an empty weight of 9,000 lbs. or less and a gross weight of 11,000 lbs.
- Depending on your present expiration date, an updated tax receipt and additional fees may be required.
- If you no longer meet the requirements for the special plate, you must return it to your local DMV office.
- Registration fees are as follows

Passenger Cars - \$40.00				
Light Trucks GVW Fees:	0001-4000	\$30.00	7001-8000	\$80.00
	4001-5000	\$40.00	8001-9000	\$90.00
	5001-6000	\$60.00	9001-10,000	\$100.00
	6001-7000	\$70.00	10,000-11,000	\$110.00
- Senior Citizen Fees are as follows:

Cars - \$36.00 (age 65)	\$38.00 (age 64)
Light Trucks with a GVW of no more than 6,000 lbs. fees are \$46.00	
- ****No senior citizen discount on special plate fee; discount is received on regular registration fee only****

APPLICANT INFORMATION

Last Name	First Name	M.I.	
Street Address			
Mailing Address			
City	State	Zip Code	E-mail Address
Telephone Number (Home)	(Work)	(Mobile)	
Vehicle Identification Number	Make	Year	Current Vehicle Plate Number

INSURANCE INFORMATION

Under penalties of perjury, I declare this vehicle is insured with the company named below and I will maintain liability insurance throughout the registration period.

Name of Insurance Company: _____

YES, I wish to donate \$5.00, more or less, to Donate Life S.C. Amount of donation \$_____.00

APPLICANT CERTIFICATION

I certify all information provided in this application is true and correct.

Printed Name _____ Signature _____

TO BE COMPLETED BY AUTHORIZED AGENT (CONTACT PERSON)

I certify that the above applicant is a county Veterans Affairs Officer entitled to a special license plate issued in accordance with Section 56-3-7000 of the South Carolina Code of Laws.

Signature

Assigned Plate Number

Print Name of Person Signing Above

Telephone Number

DMV USE ONLY

Assigned Plate Number _____

Clerks Initials _____